

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	5/9/01
FORMALITY REVIEW	C V	70513	05/22/01
RESPONSE FORMALITY REVIEW	Tz	947	10/02/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	4 1 7
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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